BEST AVAILABLE COPY

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application or Docket Number

450100-03058

CLAIMS AS FILED - PART I							5	SMALL ENTITY			OTHER THAN	
			(Column 1)		(Column 2)		1	TYPE		OR		
TOTAL CLAIMS			49					RATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMB	ER EXTRA		BASIC FEE	355.00	OR	BASIC FEE	710.00
TOTAL CHARGEABLE CLAIMS			49 minus 20=		*	29		X\$ 9=		OR	X\$18=	S22
INDEPENDENT CLAIMS			\7 minus 3 =		*	14		X40=		OR	X80≂	1120
MU	ILTIPLE DEPEN	IDENT CLAIM PI	RESENT					+135=		OR	+270=	
* If	the difference	in column 1 is	less than ze	ero, enter	"0" in column 2		L	TOTAL		OR	TOTAL	
CLAIMS AS AMENDED - PART II											OTHER	THAN
		(Column 1)	(Colum			(Column 3)		SMALL ENTITY		OR	SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIC PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	* NTATION OF MU	Minus	***	CL AIM]=		X40=		OR	X80=	
	FIRST PRESE	STATION OF IN	JEHPE DE	ZNDEN I	CLAIIVI			+135=		OR	+270=	
							L	TOTAL			TOTAL	
		(6.1)			•	(0.1	A	ADDIT. FEE			ADDIT. FEE	
		(Column 1) CLAIMS	1	(Colur HIGH		(Column 3)	1 6		4004	1 i		4551
AMENDMENT B		REMAINING AFTER AMENDMENT		NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***				X40=		OR	X80=	
	FIRST PRESE	NTATION OF MU	JLTIPLE DEF	PENDENT	CLAIM		╵┟	+135=		OR	+270=	:
							L	TOTAL		ا ۱	TOTAL	
		(Column 1)		(Colur	nn 2)	(Column 3)	A	DDIT. FEE		,	ADDIT. FEE	
		CLAIMS		HIGH	EST		lr	· · · · · · · · · · · · · · · · · · ·	ADDI-			ADDI
AMENDMENT C		REMAINING AFTER AMENDMENT		NUMI PREVIO PAID	DUSLY	PRESENT EXTRA		RATE	TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***	<u>-</u>	=		X40=		OD	X80=	
Ĺ	FIRST PRESE	NTATION OF MU	JLTIPLE DEF	PENDENT	CLAIM		 			OR	7.55=	
• 1	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.									OR	+270=	
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."										OR	TOTAL ADDIT. FEE	
		ber Previously Pai					r four	nd in the app	ropriate box	in col	umn 1.	